

Work Order ID 91829

91829

Page 1

October-19-12 12:37:17 PM

Item ID: D3297-1-0121

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: HOSE ASS'Y

Start Date: 10/18/12 Start Qty: 4.00

4

Cust Item ID:

Required Date: 11/09/12 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals:

Process Plan:

Date: 12-10-19

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D3297

Rev D

100

0.00

100

PURCHASING

Purchasing

Memo

0.00

Purchasing

Create D2729-1 label and include with W/O

Issue P/O:

18201

Hose Assembly as per Dwg D3297

Possible Supplier: API

Material release note is required

CL 12/10/22 (4)

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

Ensure Material Release Note is attached

Per ppc (4)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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FAULT CATEGORY																											
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Work Order ID 91829***91829***

Page 2

October-19-12 12:37:17 PM

Item ID: D3297-1-0121

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: HOSE ASS'Y

Start Date: 10/18/12 Start Qty: 4.00

4

Cust Item ID:

Required Date: 11/09/12 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

QC6- Inspect dimensions to drawing

0.00

120

QC

Memo

0.00

Quality Control

DAS
16
9-89 12/10/29

40

130

Small Fab

0.00

130

Small Fab

Memo

0.00

Small Fab

Install D2729-1 as per Dwg D3297
using D2182-045 Heat Shrink
Batch: 321864

40

12/10/29

140

QC5- Inspect part completeness to step on W/O

0.00

140

QC

Memo

0.00

Quality Control

DAS
15
9-89 12/10/30

4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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FAULT CATEGORY				
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Work Order ID 91829

91829

Page 3

October-19-12 12:37:17 PM

Item ID: D3297-1-0121

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: HOSE ASS'Y

Start Date: 10/18/12 Start Qty: 4.00

4

Cust Item ID:

Required Date: 11/09/12 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Identify as per dwg & Stock Location: <u>ST192</u>	0.00							
150									
Packaging	Memo	0.00				<u>4</u>			<u>12/10/31 JB</u>
Packaging									
160	QC21- Final Inspection - Work Order Release	0.00							
160									
QC	Memo	0.00							<u>12/10/31 JB</u>
Quality Control									

116-10-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Picklist Print

October-19-12 12:37:17 PM

Page 1
T

Work Order ID: 91829

Parent Item: D3297-1-0121

Parent Item Name: HOSE ASS'Y

Start Date: 10/18/12

Required Date: 11/09/12

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP: A04.11.25New issueKJ/RF

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
156001-6D0121 HOSE ASS'Y		Purchased	No			110	Each	0.0000	1	4			
D2182-045 Heat Shrink 4.5" Long		Manufactured	No			130	Each	0.0000	1	4			

B21864 (4x)

Purp/26 (4)
B.2/10/29

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

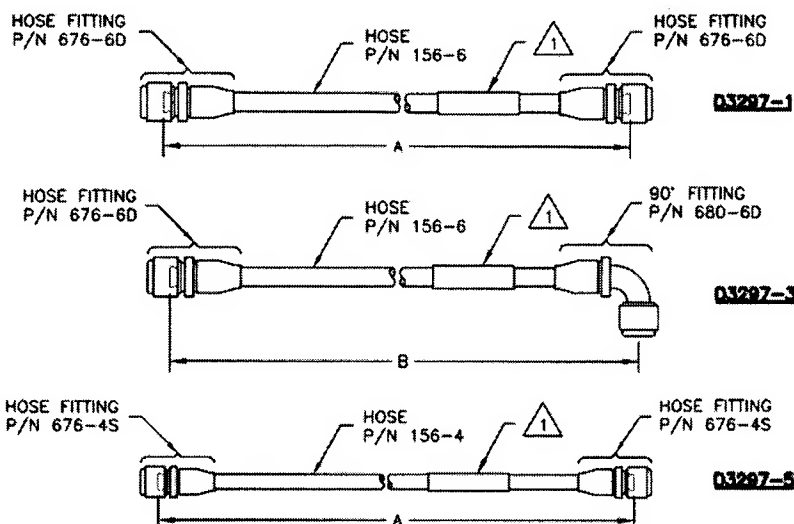
DQA: _____ Date: _____

QA Closed: _____ Date: _____

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DARTRELEASED
05.01.21

DESIGN H	DRAWN BY H	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED H	APPROVED H	DRAWING NO. D3297	REV. D SHEET 1 OF 1
DATE 05.01.21		TITLE HOSE ASSEMBLIES	SCALE NTS
A	04.07.06	NEW ISSUE	
B	04.11.01	STRATOFLEX P/N WAS AEROQUIP P/N	
C	04.11.18	T50 CORRECTED TO TSO	
D	05.01.21	CORRECT STRATOFLEX P/N	



HOSE SPECIFICATION				
DART P/N	STRATOFLEX P/N	VENDOR	A	B
D3297-1-0098	156001-6D0096	API	9.75	
D3297-1-0130	156001-6D0130	API	13.00	
D3297-1-0121	156001-6D0121	API	12.13	
D3297-3-0085	156005-6D0085	API		8.50
D3297-3-0210	156005-6D0210	API		21.00
D3297-3-0350	156005-6D0350	API		35.00
D3297-5-0410	156001-4S0410	API	41.00	

D3297-1-XXXX HOSE ASSEMBLY } WHERE XXXX REPRESENTS
D3297-3-XXXX HOSE ASSEMBLY } HOSE LENGTH IN TENTHS OF INCH
D3297-5-XXXX HOSE ASSEMBLY }

EG: 12.125" LONG: D3297-1-0121
41.00" LONG: D3297-5-0410
8.50" LONG: D3297-3-0085

NOTES:

- 1) IDENTIFY WITH DART P/N & B/N USING D2729-1 LABEL INSTALLED WITH D2182-045 HEAT SHRINK
- 2) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 3) ALL DIMENSIONS ARE IN INCHES
- 4) HOSE ASSEMBLIES TO MEET THE REQUIREMENTS OF TSO-C53a TYPE "A"

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Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO18201**

Purchase Order Date 10/22/12

PO Print Date 10/22/12

Page Number 1 of 1

Order From :

VC-AER002

AEROSPACE PRODUCTS INTERNATIONAL
P.O. BOX 223, STATION M
CALGARY, AB T2P 2H6
CA

Contact Name

Vendor Phone

800 214 7404

Vendor Fax

800 214 8875

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

REVISED

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	156001-6D0121	HOSE ASS'Y	10/26/12 Yes	4.00 Each	FedEx PI collect	\$64.7500	\$259.00

Special Inst: AS PER DWG D3297 REV. D
B91829

PO Total:

\$259.00

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

Change Nbr:

2

Change Date: 10/22/12

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required - YES NO



API
2461 46th Ave.
LACHINE QC H8T 3C9
CANADA

Page 1 of 1
10/24/2012 14:24:07

Pack List



Shipping Address DART AEROSPACE LTD. 1270 ABERDEEN STREET HAWKESBURY ON K6A 1K7 CANADA	Information Document Number 81048709 Document Date 10/24/2012 Purchase Order No. PO18201 Purchase Order Date 10/22/2012 Sales Order Number 935131 Sales Order Date 10/22/2012 Customer Number 6100481 Shipping Conditions Standard OtherGround Incoterms Cust Ship Acct Delivery Date 10/24/2012 Bill of Lading
Forwarding Agent's Address	Total Volume 0.004 IN3 Carrier FedEx
Shipping Instructions Detailed Shipping Instructions at the end of the document	
Packing Instructions Detailed Packing Instructions at the end of the document	

Item	Material	Material Description	Quantity	Weight	Batch Num
10	156001-6D-0121 Batches 0003008278 (PO:4500187194)	156-6 HOSE ASSEMBLY	4 EA	0 LB	
Shipping and Packing Instructions FEDEX P1					

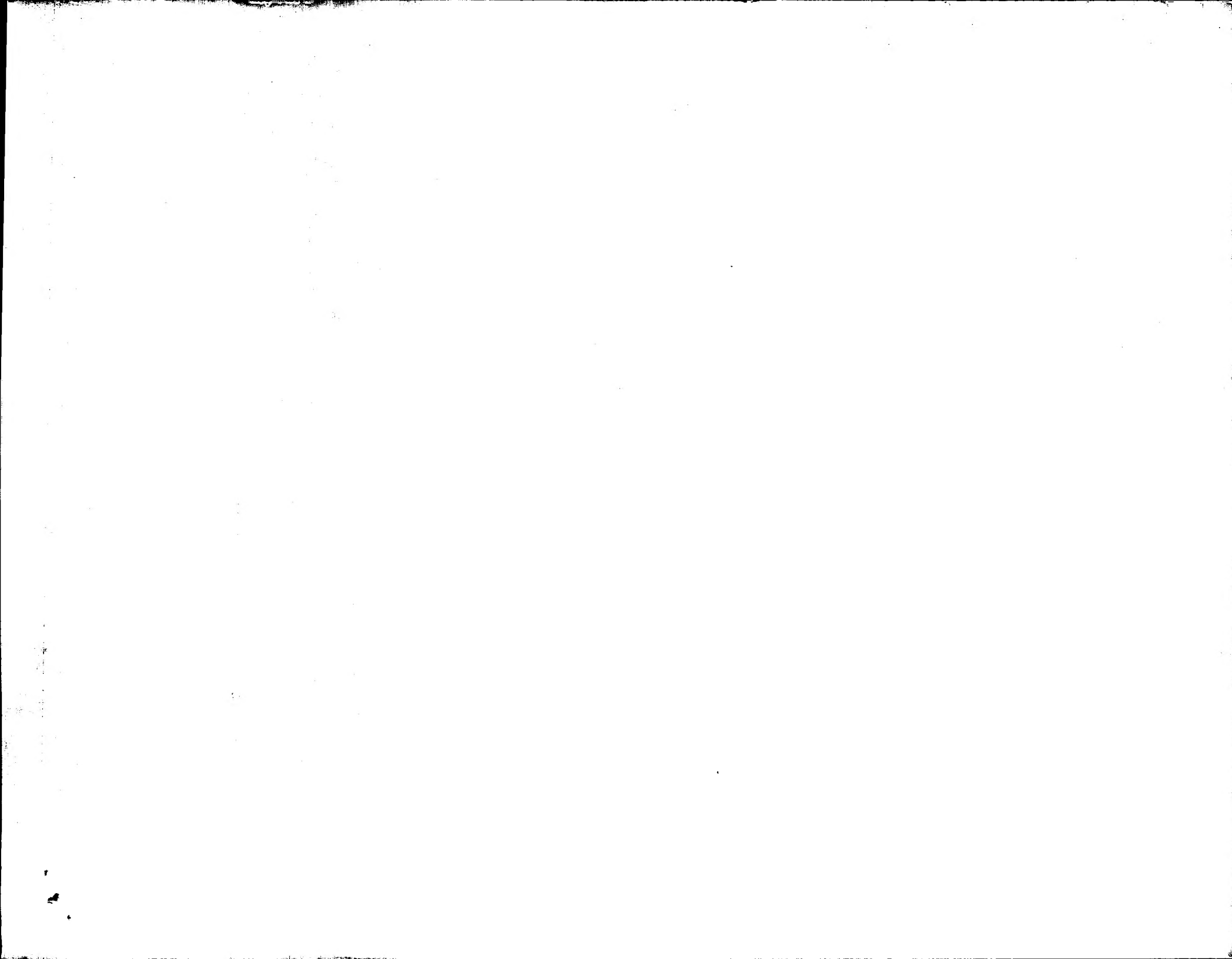
** CERTIFICATE OF CONFORMANCE **

I hereby certify that the aircraft parts described hereon were acquired from a source of supply that is consistent with the conditions under which Transport Canada distributor approval number 77-98 has been granted.

Authorized Signature

Rw







Certificate of Conformance

Customer API MONTREAL

Sales Order# 4500187194 PO# _____

Date 10/22/2012

Part#	Qty
156001-6D-0121 8,210/29	4

We hereby certify that all the above parts, including all materials, have been manufactured, tested, inspected and packed in conformance with all of the requirements of your order and the applicable government specifications & standards. Records of tests, inspection and certification indicating the above conformance are on file at Aerospace Products International and are available for your examination.

It is further certified that on any hose assemblies marked with a TSO, parts and/or materials reflected therein were produced under Federal Aviation Administration approved manufacturing quality control systems/methods as set forth in the FAA issued technical standard order authorized (TSOA) issued to Stratoflex and (b) such parts and/or material are new and are in condition for safe operation.

If applicable, satisfactory compliance with the conditions and test required for TSO approval indicates the hose assembly has met the minimum performance standards as stated in the TSO. Furthermore, it is the responsibility of the installer to determine the installation eligibility and that it will not cause the hose assembly to be subjected to conditions in excess of those for which it has been approved.

For API

